U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known ees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 10/734,593 RANSMITTAL December 15, 2003 Filing Date for FY 2005 First Named Inventor Srivatsa KUNDALGURKI **Examiner Name** Evan T. Pert Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2829 450.00 **TOTAL AMOUNT OF PAYMENT** Attorney Docket No. 543822003300 METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** FEE (\$) Fee(\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 n Λ 0 2. EXCESS CLAIM FEES Small Entity Fee(\$) Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) Fee Paid (\$) 20 0.00 Fee (\$) -20 or HP 0.00 0.00 0.00 HP + highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee Paid (\$) Fee (\$) 200.00 200.00 2 -3 or HP HP + highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or reaction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) **Total Sheets Extra Sheets** Fee (\$) (round up to a whole number) x 4. OTHER FEE(S) 450.00 Other: Extension for second month) SUBMITTED BY Registration No. 43,148 Telephone 703-760-7762 Signature (Attorney/Agent) Name (Print/Type) Kevin R. Spivak March 4, 2005 Date





Docket No.: 543822003300

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Srivatsa KUNDALGURKI

Application No.: 10/734,593

Filed: December 15, 2003 Art Unit: 2829

For: METHOD FOR REMOVING A RESIST MASK

WITH HIGH SELECTIVITY TO A CARBON HARD MARK USED FOR SEMICONDUCTOR

STRUCTURING

Examiner: Evan T. Pert

Confirmation No.: 1431

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

This is in response to the non-final Office Action dated October 4, 2004, for which a response was due on January 4, 2005. A Petition for Extension of Time (Two Month) extending the due date to March 4, 2005 is enclosed herewith. Accordingly, this response is timely filed. Reconsideration and allowance of the pending claims, as amended, in light of the remarks presented herein are respectfully requested.

Amendments to the Claims are reflected in the listing of claims which begins on Page 2 of this paper.

Remarks/Arguments begin on Page 4 of this paper.